

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAMAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

	(Type of F	Print Clearly)		
PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
MORRIS	GEORGE "RED"	A.	808/531-4551	
MAILING ADDRESS (Street)			FAX	
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601	
(City)	(State)	(Zip (Zip Code)	
HONOLULU	HAWAII	96813-2	313-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby			TELEPHONE	
CAPITOL CONSULTANTS OF HAWAII			808/531-4551	
MAILING ADDRESS (Street)			FAX	
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601	
(City)	(State)	(Zip C	(Zip Code)	
HONOLULU	HAWAII	96813	-2453	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LO	TELEPHONE 310-391-6440		
UNIDEV, LLC.			
144 II INO ABBBEOG (0)		54V 040 004 0074	
MAILING ADDRESS (Street)	FAX 310-391-6671		
3415 S. SEPULVEDA BLVD., SUITE	= 875		
3413 3. SEPOLVEDA BLVD., SOITE	_ 0/0		
(City)	(State)	(Zip Code)	
LOS ANGELES	CA	90034	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE 808-531-4551	
MELODY BUTAY DACANAY			
MAILING ADDRESS (Street)		FAX 808-533-4601	
MAILING ADDICESS (Street)		1700 000 000-4001	
222 SOUTH VINEYARD STREET, SUITE 401			

(City)	(State)	(Zip Code)		
HONOLULU	HI	96813-2453		
PART III DESCRIPTION	OF SUBJECTS UPON WHIC	H YOU EXPECT TO LOBBY		
[] Agriculture	[] Education	[] Human Services [] Science, Technology & Economic Development		
[] Communications & Public Utilities	[] Government Operations & Finance	[] Intergovernmental Relations, [] Tourism & Recreation International Affairs		
[] Consumer Protection & Commerce	[] Hawaiian Affairs	[] Labor & Employment [] Transportation		
[] Culture, Arts, Historic Preservation	[] Health	[] Planning, Land & Water [] Other: (indicate below) Use Management		
[] Ecology, Energy Environmental Protection	[X] Housing	[] Public Safety & Corrections		
	N OF LOBBYIST			
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.				
	(Signature of Lobbyist)	(Date)		
/				
PART V AUTHORIZATION	N TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
JEFF MINTER	EXECUTIVE VICE PRESIDENT			
NAME OF ORGANIZATION (if app	olicable)	TELEPHONE 310-391-6440		
UNIDEV, LLC				
MAILING ADDRESS (Street)		FAX 310-391-6671		
3415 S. SEPULVEDA BLVD., SUI	TE 875			
(City)	(State)	(Zip Code)		
LOS ANGELES	CA	90034		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.				
Ja Marts 3/15/05				
(Signat	ture of Authorizing Officer or Person	Represented) (Date)		